

PUBLIC VOUCHER FOR PURCHASES OF  
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. \_\_\_\_\_  
Bu. Vou. No. 2060

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

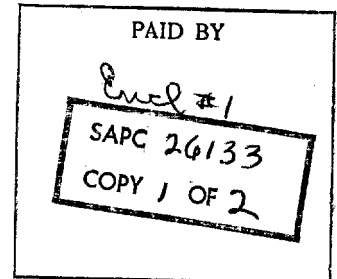
Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_  
(Payee)



No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				765	36

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total 765.36

I certify that the above bill is correct and just and that payment has not been received.

STATINTL

(Sign original only)

Date 3/28/58 \*Payee

(Date not required when a like certificate is made by payee on attached bill or billie)

Per \_\_\_\_\_ Title \_\_\_\_\_

Contract No. A-101 Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

† \_\_\_\_\_  
(Authorized Certifying Officer)

Title \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ (on Treasurer of the United States in favor of payee named above.)  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_, Payee \_\_\_\_\_

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the name of the person who signed the voucher, must be written in the space provided for the signature of the certifying officer. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Title \_\_\_\_\_

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010111-2

## Services Other Than Personal

MEMORANDUM

## CONTINUATION SHEET

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 2060

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>A-101</u> System IV					
		Direct Costs Properly Chargeable to Contract <u>A-101</u> for the period 3/10 thru 3/16/58					
		STATINTL					STATINTL
		Labor for Week Ending March 16, 1958					
		Overhead for Control Systems Division computed at interim rate of [REDACTED]					
		Total Labor and Overhead					
		G & A expense computed at interim rate of [REDACTED]					
		Total Costs					\$ 765.36 ✓
		STATINTL					